



MISSOURI DEPARTMENT OF NATURAL RESOURCES
DAM AND RESERVOIR SAFETY
ATTACHMENT - SAFETY PERMIT APPLICATION

DAM NAME		ID NUMBER
COUNTY		DATE
<div><input type="checkbox"/> ENGINEER CERTIFICATION</div> <p>I hereby certify that the construction of the _____</p> <p>_____</p> <p>(NAME OF DAM)</p> <p>was substantially in accordance with the approved plans and specifications on file with the Missouri Dam and Reservoir Safety Program.</p>		
NAME OF FIRM		ENGINEER'S SEAL
REGISTERED ENGINEER	P.E. NUMBER	